

Supplemental Application Data Sheet

Application Information

Application Number:: 10/599,804
Filing Date:: 10/10/2006
Application Type:: Regular
Subject Matter:: Utility
Suggested Classification::
Suggested Group Art Unit::
CD-ROM or CD-R?:: None
Number of CD disks:: None
Number of copies of CDs:: None
Sequence submission?::
Title:: METHODS AND SYSTEMS FOR ANALYZING SOLIDS
Attorney Docket Number:: TPI5054USPCT
Request for Early Publication?:: No
Request for Non-Publication?:: No
Suggested Drawing Figure::
Total Drawing Sheets:: 15
Small Entity:: No
Licensed US Govt. Agency:: No
Contract or Grant Numbers:: No
Secrecy Order in Parent Appl.: No

Applicant Information

Applicant Authority type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Nathan
Middle Name::
Family Name:: Kane
Name Suffix::

City of Residence:: East Haven
State or Province of Residence:: CT
Country of Residence:: USA
Street of mailing address:: 5 Mansfield Grove Road
City of mailing address:: East Haven
State or Province of mailing address:: CT
Country of mailing address:: US
Postal or Zip Code of mailing address:: 06512

Applicant Information

Applicant Authority type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: J.
Middle Name:: Michael
Family Name:: MacPhee
Name Suffix::
City of Residence:: Pawtucket
State or Province of Residence:: RI
Country of Residence:: US
Street of mailing address:: 134 Crescent Road
City of mailing address:: Pawtucket
State or Province of mailing address:: RI
Country of mailing address:: US
Postal or Zip Code of mailing address:: 02861

Applicant Information

Applicant Authority type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Mark
Middle Name::
Family Name:: Oliveira
Name Suffix::
City of Residence:: Bedford
State or Province of Residence:: MA
Country of Residence:: US
Street of mailing address:: 76 Hancock Street
City of mailing address:: Bedford
State or Province of mailing address:: MA
Country of mailing address:: US
Postal or Zip Code of mailing address:: 01730

Correspondence Information

Correspondence Customer Number:: 27777

Representative Information

Representative Customer Number::	27777
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Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This application	National Stage of	PCT/US05/12686	04/14/2005
PCT/US05/12686	Continuation of	60/562,358	04/15/2004

Foreign Priority Information

Country::	Application Number::	Filing Date::	Priority Claimed::

Assignee Information

Assignee Name:: TransForm Pharmaceuticals, Inc.

Street of mailing address:: 29 Hartwell Avenue

City of mailing address:: Lexington

State or Province of mailing address::MA

Country of mailing address:: USA

Postal or Zip Code of mailing address:: 02421